

# Participation of a specialist doctor in the procedure of evaluating the need for special education on the grounds of being deaf/hard of hearing

## Udział lekarza specjalisty w procedurze orzekania o potrzebie kształcenia specjalnego z uwagi na niesłyszenie/słabosłyszenie

### Authors' Contribution:

A – Study Design  
B – Data Collection  
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Article history: Received: 14.01.2019 Accepted: 25.02.2019 Published: 15.02.2019

### ABSTRACT:

The paper discusses the procedure of evaluating the need for special education for pupils with hearing impairment based on the provisions of the education law currently in force in the Polish education system. The latest material on the aforementioned subject appeared in the audiological literature, in a publication edited by Antoni Pruszevicz and Andrzej Obrębowski [17]. The aim of the paper is to update the data on qualification of children with hearing impairment as pupils with disabilities (more generally: with special educational needs) and to define the role of a specialist doctor – audiologist, laryngologist, otolaryngologist – in evaluation for education purposes.

### KEYWORDS:

certificate stating the need for special education, evaluation board, psychological and pedagogical counselling centre

### STRESZCZENIE:

W artykule omówiono procedurę orzekania o potrzebie kształcenia specjalnego dla uczniów z uszkodzonym słuchem na podstawie obowiązujących aktualnie przepisów prawa oświatowego. Ostatni materiał, który ukazał się na powyższy temat, został zamieszczony w piśmiennictwie audiologicznym w publikacji pod redakcją Antoniego Pruszevicza i Andrzeja Obrębowskiego [17]. Celem artykułu jest aktualizacja danych, dotyczących kwalifikacji dzieci z zaburzeniami słuchu do grupy uczniów niepełnosprawnych (szerzej: ze specjalnymi potrzebami edukacyjnymi) oraz określenie roli lekarza specjalisty – audiologa, laryngologa, otolaryngologa – w orzecznictwie dla potrzeb edukacji.

**SŁOWA KLUCZOWE:** orzeczenie o potrzebie kształcenia specjalnego, zespół orzekający, poradnia psychologiczno-pedagogiczna

## LIST OF ABBREVIATIONS

PPCC – psychological and pedagogical counselling centre,  
OIB – evaluation board,  
ICD – International Classification of Diseases,  
IETP – individual educational and therapeutic programme,  
MNE – Ministry of National Education,  
SP – Statistics Poland

## INTRODUCTION

In Poland, the basic system that defines the status of a person with disabilities and resulting limitations is the disability evaluation system, which is implemented by county disability evaluation boards based on the provisions of the Act of 27 August 1997 on vocational and social rehabilitation and employment of people with disabilities [1]. The evaluation is conducted in specific areas of social

and professional functioning, therefore it is not comprehensive. For instance, the issue of education is not addressed sufficiently. In addition to the disability evaluation system, there is a system of evaluation of the need for special education. The challenge is to create a comprehensive disability evaluation system based on a holistic biopsychosocial diagnosis performed in all the areas of life, where possible. Education studies often mention various attempts to define a functional diagnosis. The objective of evaluation viewed in this way is to make sure that individual forms of support are better matched to their beneficiaries, and thereby to ensure psychosocial integration to people with disabilities. The evaluation system should also be characterised by universality, understood as the possibility of using diagnostic (evaluation) findings to build support in the process of education, to model an effective process of medical rehabilitation, and employment path [2]. In 2017, the Prime Minister set up an interministerial team of experts responsible for developing a system for evaluation of disability and incapacity for work. Their tasks included, among other things, analysis of the functioning of the existing system in the context of its cohesion, and development of the draft of a new law on evaluation of disability and incapacity for work. Professor Gertruda Uścińska, President of the Polish Social Insurance Institution (Zakład Ubezpieczeń Społecznych – ZUS ZUS) and Head of the Team, stresses that the currently prepared reform in the area of evaluation of disability and incapacity for work is designed to bring order to the system, and make it transparent and comprehensive in terms of the rights of a person with disabilities. A novelty, following other European countries, will be a three-degree category of reliance on care. A dependant person will be defined as one who needs assistance in performing everyday activities [3,4].

The objective of the analyses in this paper is the process of evaluation of the need for special education for hearing-impaired pupils, which specifies the scope of support provided to them in an educational facility. The area of education is still key in terms of preparing people with disabilities for entering the labour market and their full psychosocial integration in adult life.

## TASKS OF A PSYCHOLOGICAL AND PEDAGOGICAL COUNSELLING CENTRE IN THE SYSTEM OF EVALUATION OF THE NEED FOR SPECIAL EDUCATION IN POLAND

The first career centres for youth emerged in the interwar period. In the 1960s, educational and vocational counselling centres were established, thus extending the tasks of counselling. In 1993, by decision of the Minister of National Education, educational and vocational counselling centres were converted to psychological and pedagogical counselling centres, which continue to function under this name to date. Currently, there are 573 public psychological and pedagogical counselling centres (PPCC) operating, including 32 (5.58%) specialised ones, dedicated to providing assistance in homogeneous problems. The body in charge of psychological and pedagogical counselling centres is land district or a city with district rights. Every unit of the education system (nursery school, school) has its own district counselling centre, whereas children who do not attend a nursery school are covered by the counselling centre servicing the district in

which their place of residence is located. The detailed principles of the functioning of public psychological and pedagogical counselling centres are regulated by the Regulation of the Ministry of National Education of 1 February 2013 on the detailed principles of the functioning of public psychological and pedagogical counselling centres, including public specialised counselling centres [5], as amended by Regulation of 25 August 2017 [6]. There is a growing number of non-public psychological and pedagogical counselling centres. The bodies in charge of non-public counselling centres are private persons, companies and associations. These are commercial organisations [7].

Under the abovementioned Regulation, specialists employed in psychological and pedagogical counselling centres:

- provide children, from birth, and youth with psychological and pedagogical assistance, and
- assistance in choosing the direction of education and profession,
- provide parents and teachers with psychological and pedagogical assistance related to raising and educating children and youth,
- support nursery schools, schools and schooling centres in execution of educational, pedagogical and care-related tasks [5].

Specific tasks of psychological and pedagogical counselling centres include:

1. diagnosing children and youth,
2. providing children and youth as well as parents with direct psychological and pedagogical assistance,
3. executing preventive tasks and tasks aimed at supporting the pedagogical and educational function of a nursery school, school and schooling facility, including aiding teachers in solving educational and pedagogical problems,
4. organising and providing support for nursery schools, schools and schooling facilities in execution of educational, pedagogical and care-related tasks [5].

The tasks assigned to such counselling centres are executed by: psychologists, pedagogists, speech therapists and career advisers. The tasks, depending on the needs, may also be executed with the help of other specialists, in particular doctors, whose participation is necessary for effective provision of psychological and pedagogical assistance to children and youth, parents and teachers [5].

The effects of the work of the above-listed specialists include:

- issuance of an appropriate opinion (in total, a psychological and pedagogical counselling centre issues opinions on nearly 16 different matters related to education of children and youth up to the age of 19),
- issuance of a certificate stating the need for:
  - special education on the grounds of disability for children/pupils who are: deaf, hard of hearing, blind, partially sighted, with physical disabilities, including those with apha-

sia, with mild, moderate or substantial intellectual disability, with autism, including Asperger syndrome, and with multiple disabilities [8],

- special education for socially maladjusted pupils, and those at risk of social maladjustment, who require special organisation of learning and work methods [8],
- individual, mandatory one-year pre-school preparation/need for individual teaching,
- educational and rehabilitation classes for children and youth with profound intellectual disabilities. Such a certificate is issued for a period of not more than 5 school years, and the classes, in an individual form or in groups, are offered to children and youth aged from 3 to 25 [9].

The certificates are issued by evaluation boards (EB) of only those counselling centres that were designated by the superintendent of schools, having met specified conditions concerning specialist staff and possession of diagnostic instruments,

- provision of direct psychological and pedagogical assistance to children and youth, as well as parents,
- supporting teachers in working with children and youth and with their parents [5].

## PROCEDURE FOR EVALUATION OF THE NEED FOR SPECIAL EDUCATION

The procedure for evaluation of the need for special education is regulated by Regulation of the Ministry of National Education of 7 September 2017 on certificates and opinions issued by evaluation boards functioning within public psychological and pedagogical counselling centres [9]. Based on a multi-faceted diagnosis by an evaluation board, psychological and pedagogical counselling centres decide whether a child requires special education, and develop guidance on the methods and forms of work with the child/pupil, as well as suggest the most beneficial forms of education, i.e. type of school in which the child should be educated.

A certificate is issued at the request of parents/legal guardians of the child/pupil. The parent attaches to the application the justification and relevant documentation, in particular specialists' opinions, certificates, results of psychological, pedagogical and medical observations and examinations, medical documentation, and documentation pertaining specialist treatment. In order to issue a certificate acknowledging the need for special education, a medical certificate is required stating the type of the child's/pupil's disability. The application for issuing a certificate acknowledging the need for an individual, mandatory one-year pre-school preparation / individual teaching programme must be accompanied by a certificate of the child's/pupil's health, issued by a specialist doctor or a general practitioner based on medical documentation from specialist treatment. In the certificate, the doctor must state an anticipated period, not less than 30 days and not exceeding one school year, in which the child's/pupil's health condition will make it impossible or much more difficult for them to attend nur-

sery school/school, diagnose the disease/health condition along with providing its alphanumeric code in accordance with the current International Classification of Diseases (ICD) and define the limitations in the child's/pupil/s functioning as a result of the health condition which make it impossible or much more difficult for them to attend an educational facility. If the pupil attends a school providing vocational training, the application for issuing a certificate acknowledging the need for individual education must be accompanied by a certificate issued by an occupational doctor determining the pupil's capacity for further education in a given vocation, including the conditions under which practical learning of the vocation should take place, if the evaluation board decides that such a certificate is necessary for issuing a certificate acknowledging the need for individual education [9].

In order to obtain information about the pupil's educational situation, the chairman of the evaluation board may also request the relevant headmaster of the educational facility to have an opinion issued by the pupil's teachers, and inform about this the applicant. The applicant himself/herself may also request the issuance of such an opinion.

The evaluation board of a psychological and pedagogical counselling centre is appointed by the centre's director. The board consists of: the centre's director or a person authorised by him/her – as the chairman of the evaluation board – a psychologist, pedagogist, doctor and other specialists, in particular those with qualifications in special education (in case of issuing a certificate concerning a child with hearing damage – deaf educator, speech therapist), if their participation in the board's work is necessary. The following persons: a) teachers, form teachers and specialists teaching the child/pupil in the schooling facility, b) classroom assistant or school common room assistant, c) classroom assistant in special needs schools, d) Roma education assistant, e) other specialists may also participate in an advisory capacity in the board's sessions at the chairman's request and with the child's/parent's consent. Also the child's/pupil's parents or pupils aged at least 18 have the right to participate in the session and present their positions [9].

Certificates acknowledging the need for special education are issued within no more than 30 days from the day on which the child's/pupil's parents filed the application for issuing a certificate [9]. Once a certificate is issued acknowledging the need for special education, education is organised in the schooling facility (special needs school, inclusive school or mainstream school) chosen by the child's/pupil's parents. The facility's headmaster is obliged to:

- organise individual rehabilitation classes – in accordance with the recommendations in the certificate [8],
- provide psychological and pedagogical assistance in the form of specialised classes: speech therapy classes, corrective and compensatory classes, or other depending on the child's/pupil's needs [10],
- may exempt the hearing-impaired pupil from the obligation to learn a second modern foreign language [11].

The pupil evaluated as having special educational needs is educated based on an individual educational and therapeutic programme

(IETP), which should be consistent with the certificate acknowledging the need for special education [8]. The procedure for evaluating the need for special education and the consequences for the process of education are presented in diagram I.

Both deaf and hard of hearing pupils require that the forms and methods of educational and pedagogical work are adjusted to them. Therefore, it is necessary, among other things, to:

- ensure that the place occupied by the child/pupil in a classroom allows them to control the teacher's face as well as the faces of other persons (arranging the desks in an arc, semi-circle, or seating the child/pupil in the first line of desks and ensuring them the possibility of turning around in class),
- make sure that the teacher avoids covering their face with hands or a book, or standing with their back towards the child/pupil while conveying the lesson's content, verbal messages (speaking or reading),
- indicate the most important points by highlighting in the text book the material that must be learned,
- ensure a longer time for acquiring the content received through the auditory channel (e.g. during foreign language lessons – listening exercises),
- make sure that the pupil has correctly heard and understood the questions, instructions,
- make sure that the noise level during the lessons is kept to minimum, provide the child/pupil with a personal device that amplifies the voice of the speaker and reduces ambient noise (FM type hearing aid)
- complement the auditory material with information presented visually; thus, it is advisable to use visual aids (tables, charts, drawings, diagrams, etc.), explain unfamiliar, abstract concepts, provide help during oral answers (by asking additional questions),
- avoid, e.g. during class work, dictating a task description to the pupil – the pupil should receive the text of an instruction or task written down on a piece of paper, and once they complete the task – another one should be given (this will prevent an incorrect writing down of the data, excessive haste, tension),
- take into account the fact that distraction, fatigability, excessive fidgetiness may occur.

### Tasks of the specialists on the evaluation board of a psychological and pedagogical counselling centre

The tasks of the teachers in psychological and pedagogical counselling centres: pedagogists, psychologists, speech therapists and other specialists, are defined as from 1 September 2018 by the Regulation of the Ministry of National Education of 3 August 2018 concerning the list of lessons conducted directly with or for pupils by the teachers of psychological and pedagogical counselling centres and teachers who are: pedagogists, psychologists, speech therapists, pedagogical therapists and career advisers [12]. The aim of the regulation is to indicate the tasks to be executed during the weekly number of hours of lessons and guarantee that in all schooling facilities lessons of the same type are conducted by specialist teachers. A different working time – the so-called workload – was established for teachers in psychological and pedagogical counsel-

ling centres (20 hours) compared to specialist teachers working in schools (up to 22 hours). This was laid down in the Act Teacher's Charter [13]. The aforementioned Regulation specifies the tasks connected with diagnostic activity of the teachers in psychological and pedagogical counselling centres, which encompass studies, including screening, and observations of the children's and youth's functioning in an educational setting, and a multidisciplinary evaluation of the level of functioning of the pupils provided with special education. However, the workload does not include the participation of psychological and pedagogical counselling centres' specialists in the sessions of evaluation boards.

### Tasks of the chairman of a psychological and pedagogical counselling centre's evaluation board

- managing the work of the board,
- analysing applications submitted to the evaluation board along with attached documentation. In the case of the lack of relevant expert opinions, ordering examinations to be conducted by psychological and pedagogical counselling centres' specialists, who are then usually appointed as members of the evaluation board.

### Tasks of the psychologist – member of a psychological and pedagogical counselling centre's evaluation board

- examining the pupil's cognitive potential, personality, development of the socio-emotional and motivational spheres,
- description of the mechanisms explaining the functioning of the child/pupil in an educational environment in terms of their disability,
- specifying the child's/pupil's individual developmental and educational needs, including the indication of their strengths.

### Tasks of the pedagogist / special education pedagogist – member of a psychological and pedagogical counselling centre's evaluation board

- evaluating the level of mastering school competencies: reading, writing, calculating as well as the perceptual-motor functions underlying such processes,
- specifying the child's/pupil's individual educational needs, strengths.

### Tasks of the doctor – a member of a psychological and pedagogical counselling centre's evaluation board

- analysing medical documentation pertaining the child/pupil in question, ordering additional medical, specialist examination, if needed.

It is important that the child's doctor (in the case of hearing damage – laryngologist, audiologist) issue a medical certificate stating the type of the child's/pupil's disability. Practical experience in this area shows that members of the evaluation board of a psychological and pedagogical counselling centre usually expect that

**Tab. I.** Participation of deaf and hard of hearing pupils in special education in mainstream and special facilities in 2016/2017 and 2017/2018 – comparative analysis based on data from Statistics Poland “Oświata i wychowanie” [18,19].

		DEAF	HARD OF HEARING	PUPILS WITH DISABILITIES IN TOTAL
mainstream primary schools				
POLAND	2016/2017 table III.15	414	4297	49 308
	2017/2018 table III.14	485	5339	63 302
special primary schools				
POLAND	2016/2017 table III.19	289	267	24 255
	2017/2018 table III.18	324	333	30 402
mainstream middle schools				
POLAND	2016/2017 table IV.15	162	2148	24 811
	2017/2018 table IV.15	113	1538	18 134
special middle schools				
POLAND	2016/2017 table IV.20	229	227	22 892
	2017/2018 table IV.20	166	141	16 377
mainstream first-cycle vocational schools (+complex of special education schools)				
POLAND	2016/2017 table V.2.10	11	232	3 582
	2017/2018 table V.2.10	10	233	3 676
special first-cycle vocational schools				
POLAND	2016/2017 table V.2.17	143	70	10 757
	2017/2018 table V.2.17	122	71	10 007
mainstream secondary schools				
POLAND	2016/2017 table V.3.8	66	626	4147
	2017/2018 table V.3.8	68	653	4577
special secondary schools				
POLAND	2016/2017 table V.3.15	152	60	1135
	2017/2018 table V.3.15	105	78	1099
mainstream technical high schools				
POLAND	2016/2017 table V.4.10	56	744	3001
	2017/2018 table V.4.10	65	751*	3442
special technical high schools				
POLAND	2016/2017 table V.4.18	287	130	852
	2017/2018 table V.4.18	268	127	801
special care educational facilities				
POLAND	2016/2017 table VII.1	776	297	12 077
	2017/2018 table VII.1	703	319	11 408

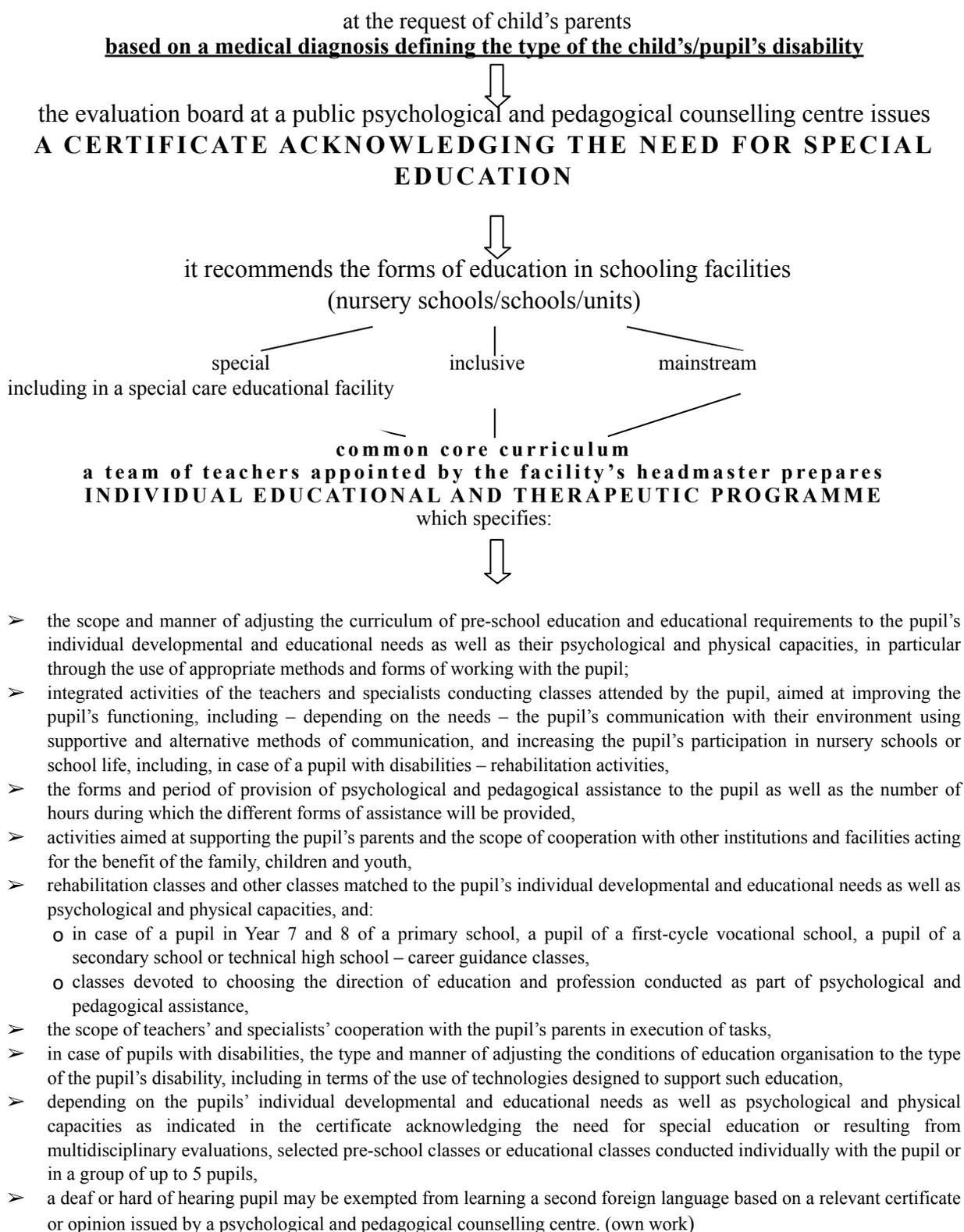
\* Hard of hearing pupils constituted the most numerous group (20.7%) of pupils in mainstream technical high schools among all pupils with special educational needs

is stated, in a written form, that the child/pupil qualifies for special education on the grounds of being hard of hearing or deaf. However, such expectations seem to be in conflict with medical practice. It is difficult for a doctor to evaluate how hearing damage in a given case determines the functioning of the patient in a school setting. It should be stressed that this is the task of the interdisciplinary evaluation board of a psychological and pedagogical counselling centre. Summing up, issuing a certificate acknowledging the need for special education on the grounds of being deaf or hard of hearing – the terminology is in accordance with the guidelines of the Ministry of National Education [8], different from ICD-10, requires an interdisciplinary work by various specialists, who usually include:

- audiologist/laryngologist/otolaryngologist, who, based on specialist examinations, will confirm or exclude hearing impediments – conductive hearing loss, sensorineural hearing loss, mixed hearing loss, other, in accordance with ICD-10 as used in medical circles. However, such a diagnosis does not describe the hearing loss in terms of the functioning of the person suffering from it.
- psychologist, who evaluates the child’s/pupil’s cognitive and emotional capacities,
- pedagogist/special education pedagogist, who provides information on the child’s mastering of school competencies: reading, writing, the pupil’s behaviour in tasks-related situations,

**Diagram I.**

**PROCEDURE FOR EVALUATION OF THE NEED FOR SPECIAL EDUCATION IN THE  
EDUCATION SUPPORT SYSTEM IN POLAND**



- speech therapist, who evaluates how the child communicates, their language communication capacity – communication competencies, language skills taking into account language development in all of its aspects.

During the diagnosis, of importance is the information obtained from the child's guardians/parents about the child's psychological and physical development since their birth, the course of the pregnancy and childbirth, as well as information from other specialists and teachers working with the child on a daily basis. The task of such a team of specialists is to describe how the pupil functions as a result of their hearing damage in educational situations. In 1993, the Ministry of National Education officially introduced, by way of law, the terms "deaf" and "hard of hearing" [14]. The functional boundary between a deaf and hard of hearing child/pupil is determined by a number of factors, including the level of technical capabilities to compensate the hearing damage [15]. When qualifying the child/pupil for special education on the grounds of their being hard of hearing or deaf, the members of the evaluation board of a psychological and pedagogical counselling centre should take into account the following criteria: (extensively covered in the literature [16]):

- degree and character of hearing loss,
- level of the intellectual development,
- level of the development of speech and language (development of communication competencies and skills, including willingness to speak, stock of learned words, understanding of verbal speech through the auditory channel, ability to lip read, articulation),
- effectiveness of the hearing, speech and language rehabilitation undergone so far, including the extent of using hearing instruments (hearing aids, cochlear implants, other),
- the child's/pupil's personality traits, motivation to overcome difficulties, degree of socialisation,
- the child's readiness to start school education or the level of the pupil's mastering of school competencies: reading, writing, calculating [17].

As a rule, both in theory (deaf education, psychology of deaf, speech therapy of deaf) and educational practice, a deaf pupil is considered to be one who, regardless of the degree of hearing damage, does not use phonic language in the process of education, and so requires the use of alternative, visual methods of communication – usually sign language. A hard of hearing pupil is one who communicates using phonic language, although their articulation can be distorted, and their reliance on the partial hearing is aided by a hearing instrument and visual perception.

## SHARE OF PUPILS WITH DISABILITIES IN THE PROCESS OF SPECIAL EDUCATION, WITH A PARTICULAR FOCUS ON DEAF AND HARD OF HEARING PUPILS – ANALYSES OF NUMERICAL DATA

In the 2017/18 school year, a total of 93 704 pupils with special educational needs learned in primary schools (mainstream and

special), whereas in middle schools the figure was 34 511. They accounted for 3.5% of the total population of primary school pupils and 4.9% of the total population of middle school pupils.

Pupils with a certificate acknowledging the need for special education in most cases attended mainstream primary schools, i.e. 67.2%, and mainstream middle schools, i.e. 51.6%. The analysis of the figures as from the year 2005/2006 shows that the number of pupils with disabilities attending mainstream schools has increased year-on-year. In mainstream and special primary schools, pupils with mild intellectual disabilities accounted for the biggest share (24.7%), followed by those with multiple disabilities (17.9%), with autism, including Asperger syndrome (17.5%), with physical disability, including aphasia (11.5%) and moderate or severe intellectual disabilities (9.9%).

Among pupils with disabilities attending special and mainstream middle schools, those with mild intellectual disabilities dominated in terms of the number (10.6 thousand), followed by those with moderate or severe intellectual disabilities (4.7 thousand), with multiple disabilities (4.8 thousand) and those at risk of social maladjustment (4.4 thousand).

Of all pupils provided with special education in vocational first-cycle schools, pupils with a certificate of mild intellectual disability represented the biggest share (71.5%). The share of pupils with multiple disabilities was 10.5%, whereas that of the socially maladjusted accounted for 5.3%.

In secondary schools, pupils with autism, including Asperger syndrome, constituted the biggest group, accounting for 26.7% of all pupils with special educational needs. The share of pupils with physical disability, including aphasia, was 21.5%, while that of hard of hearing pupils was 12.9%, and that of partially sighted – 12.0%.

In the 2017/18 school year, in mainstream technical high schools, like in the previous school year, hard of hearing pupils constituted the biggest group, accounting for 20.7% of all pupils with special educational needs in such schools. The share of partially sighted pupils was 14.0%, while those with physical disability, including aphasia – 17.4%.

Over half of all pupils with disabilities attend mainstream primary schools and middle schools. Deaf and hard of hearing pupils are more likely to attend mainstream primary schools than special primary schools. This trend does not apply to schools at a higher level than primary school. Starting from the middle school, deaf pupils tend to receive education in special schools, while hard of hearing pupils – in mainstream schools.

## SUMMARY. FINAL CONCLUSIONS

- there is a growing share of pupils with disabilities, i.e. those who in the light of educational law have a certificate acknowledging the need for special education, in mainstream schools, which will require implementation of further flexible and, above all, systemic solutions in inclusive education,

- it is vital to prepare teachers to take up new challenges, including those related, among other things, to diagnosing individual needs and psychological and physical capacities in a group of pupils with differing development levels
- it is important to establish a close cooperation in the process of evaluation of the need for special education between teachers/specialists at psychological and pedagogical counselling centres and the teachers and other persons/specialists working with the child/pupil and their family – in order to prepare a functional diagnosis that will be universal and comprehensive, consistent with the assumptions of the currently reformed system of evaluation of disability and incapacity for work,
- given the above, the procedures defining the work of a psychological and pedagogical counselling centre's evaluation board should be reviewed.

It is unjustified, and may even prove detrimental, that the participation of specialists from a psychological and pedagogical coun-

selling centre in an evaluation board's sessions have been excluded from the workload [12]. Participation in the works of an evaluation board is associated with significant responsibility for how the work progresses, requires knowledge and skills, thoroughness, and is sometimes time-consuming. Who will take the responsibility for the mistakes made in the process of evaluation, if the working time of the members of an evaluation board is unlimited and undocumented as part of individual activities of specialists,

- it is recommended to specify the scope of activities and responsibilities of individual specialists, in particular the role of doctors issuing disability certificates to a child/pupil. At present, it seems that their voice is too often decisive in evaluation of the need for special education. This undermines the role of specialists defining the child's/pupil's individual educational needs and psychological and physical capacities as a result of their disability. A doctor's task should be to perform a medical diagnosis, to specify the child's hearing capacity. The role of the other specialists of the evaluation board is to indicate whether the pupil qualifies for special education due to the hearing damage diagnosed by the doctor.

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Word count: 4530 Tables: 1 Figures: – References: 19

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Access the article online: DOI: 10.5604/01.3001.0012.8606 Table of content: <https://otorhinolaryngologypl.com/issue/11876>

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Competing interests: The authors declare that they have no competing interests.

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Cite this article as: Cite this article as: Zaborniak-Sobczak M., Bieńkowska K., Grot-Mrozicka M., Mazurewicz-Rzepka M.: Participation of a specialist doctor in the procedure of evaluating the need for special education on the grounds of being deaf/hard of hearing; Pol Otorhino Rev 2019; 8(1): 7-15

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